

Approved For Release 2000/04/11 : CIA-RDP64-00360R000400020014-1

SERVICES OTHER THAN PERSONAL

P. O. Vou. No. _____
Bu. Vou. No. 9

U. S. Cost Reimbursable

(Department, bureau, or establishment)

Voucher prepared at _____

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. 239

To _____

(Payee)

PAID BY

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				6,701	23
Shipped from _____ to _____ Weight _____ Government B/L No. _____				Total		6,701	23

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences _____

STATINTL

Date 3/21/55

Con _____

Purs _____

† Ap _____

By _____

Title _____

Paid by { Check No. _____ dated _____, 19____, for \$ _____ } on Treasurer of the United States in
Cash, \$ _____, on _____, 19____. Payee _____ favor of payee named above.
(Sign original only)

Voucher is signed or receipted in the name of a company or corporation, the name of the person company or corporate name, as well as the capacity in which he signs, must appear. For example: Company, per John Smith, Secretary, or "Treasurer" as the case may be. If the voucher is signed by a person other than the payee, the signatory must sign as "per" and state the official title. Otherwise the approving officer will sign on the line below "Approved for \$ _____", and

Per _____

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Bureau Voucher for Purchases and
Services Other Than Personal

CONTINUATION SHEET

U. S. Cost Reimbursable

Sheet No. _____ of Bureau Voucher No. 9

(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		CONFIDENTIAL PAYROLL					
		Direct Labor Cost properly chargeable to Contract A101 for the period 3/7/55 thru 3/13/55.					
		Week Ending 2/13/55				2,792	18
		STATOTHR.					
						3,909	05
						6,701	23

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